## See Instructions on back of page 6.

Department of Toxic Substances Control

WASTE MANIFEST  Generator's Name and Mailing Address  Douglas Aircraft Compa  3855 Lakewood Blvd. Long	rator's US EPA ID No.	44 1/ 1.5		
MASTE MANIFEST CAID  Generator's Name and Mailing Address  Douglas Aircraft Compa  3855 Lakewood Blvd. Long		Manifest Document No.	2. Page 1	Information in the shaded areas
3. Generator's Name and Mailing Address Douglas Aircraft Compa 3855 Lakewood Blvd. Long			W. Com.	is not required by Federal law.
Douglas Aircraft Compa 3855 Lakewood Blvd. Long	0101816151/10101015	01.91	1 6	
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3855 Lakewood Blvd. Long		· Attus	rate Manifest Document	Number
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	Beach , CA 90846		ate Cenerator (42)	
4. Generator's Phone (3/0) 10/-/20-	40 (TIA) FOT -	5101	LIMITED 2	6010151619181
4. Generator's Phone (310) 494-6287  5. Transporter 1 Company Name	OR (310) 37.3 -	,,,,		
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7. Transporter 2 Company Name	8. US EPA ID Number	£ ∏Si	ale Transporter's ID	
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9. Designated Facility Name and Site Address	10. US EPA ID Number		TO STORY S ID TO	カカトラフェー
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2060 North Alameda Str. Compton, CA 90222	CATOSON	13352	310)537	-7100 TELEVISION
-vinting -/		12. Containers	13. Total	14. Unit
11. US DOT Description (including Proper Shipping Name,	, Hazard Class, and ID Number)			Wt/Vol 1. Waste Number
		No. Typ	e Quantity	
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といし プリア ツコー			and the second second	
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6. GENERATOR'S CERTIFICATION: I hereby declare the	at the contents of the consignment are	fully and accurately descri	ihed above by proper	shipping name and are classified
packed, marked, and labeled, and are in all respects in	n proper condition for transport by his	thway according to application	able federal state and	international laws
gastion, marked, and labeled, and the in all respects in	in proper continuit for iturisport by file	may according to applic	uble leuciul, state and	mendional laws.
If I am a large quantity generator, I certify that I ha	practicable method of treatment, store	age or disposal surrently		
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economically practicable and that I have selected the threat to human health and the environment; OR, if I	am a small quantity generator, I hav			ste generation and select the best
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TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS. (Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONTE CENTER 1-800-424-8802. WITHIN CALEORNIA, CALL 1-800-852-755

Printed/Typed Name

Robert Gally Signature

Signature Robert Gally Gally

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name
Signature

Day Yea

DO NOT WRITE BELOW THIS LINE

6

CASE

Z

Month



## Field Response Time Sheet

VISION Payroll

Purpose: To document labor, equipment, materials and outside items used on a project for the specified date. This form serves as the input document for labor and equipment charges. Materials and outside items are charged on other forms, but are included here so that all charges are listed.

Instructions: See reverse side for further instructions.

Client Name MC DONNELL DOUGLAS  Client PO/Job No.			Project Name VAC TRUC  DAC TOYCANCE  Project Location 19503 S.  TOYCANCE					WOR	ex lit	2	e ,	440	n ú -	
Final Service O	rder Contractual Minimum Hours Apply	□ DBA	SCA	W/O No	Ö. 🗀	Torra	ncė — l	ر Init No	<i>A</i>	90	50	2_ ′		
Service Performed						A LOS XX					)			
Labor								Accounting Use Only						
WTS H,N, Class	Employee Name	En	nployee No.	Start Time	Time Out	Stop Time	Bill Code	ST	OT 1.0	OT 1.5	OT 2.0	Total	Bill Type	Initia
por	RUDY B. GILLIAM	12	972	1500	_	18:30						3/2		
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Item or Unit Number	Pr Description	UOM	Qty	Item o	Item or Unit Number			Description				UC	М	Qty
	Truck, Gear				Port., Tank									
	Truck, 4 Wheel Drive Van						Compressor; CFM:							
750	Truck, PAU VAC BOS TAIL	up	3		Blower, Size:						·			

KW:

## Instructions for Completing the Field Response Time Sheet

A Field Response Time Sheet is completed for each day charges are incurred to a project using Field Response Time Sheets. Self-explanatory fields are not included.

Field Instruction

Date The date work was performed and circle the applicable day.

Cost Code Project's cost code work will be charged to. VISION projects require an 8-digit cost code.

Final Service Order Check if this Field Response will be the final one for the project.

Contractual Minimum Hours Apply Check if the project's contract requires a minimum hours charge.

Equipment

Item or Unit Number ltem number or unit number assigned to the equipment

Description Equipment category

UOM Unit of measure: HR = hourly, DY = day, WK = weekly, MT = monthly, NO = non-operational

Qty Quantity charged to project

**Materials** 

Note: Materials are charged to the project with an Item Issue/Return form. Only billable material used on the Field Response date should be listed here.

Item Number assigned to the material

Description Description of material

UOM Unit of measure

Qty Quantity charged to project

## Rental/Outside Items

Note: Rental/outside items are charged to the project through vendor invoices. These charges are listed as a convenience to the client.